

“Good morning, Olivia. It’s time for speech! I’m so glad you came to play with me today! Are you ready to get started?” Miss Katie greets Olivia and her mother with a smile as they enter the waiting room. “Hi, Liz. How are you today? How was your brother’s wedding this weekend?”

“Everything turned out perfectly. Thanks for asking.” Olivia’s mother takes a seat and grabs a magazine. Olivia waves goodbye as she runs down the hall to Miss Katie’s room anxious to see which games and toys await her today. Olivia is excited to see that her

difficulty with one sound or is completely unable to communicate. In the process of improving communication, most children find speech therapy to be exciting, uplifting, and encouraging. Speech and language therapy can take place in a variety of settings, but the most common locations include private practice clinics, the patient’s home, or a daycare setting. Depending on an individual child’s need, speech and language therapy sessions usually occur once or twice per week. Parents may choose to observe or participate in the session or wait outside.

It is important to look for a clinician that has completed a master’s degree program and is endorsed through the American Speech-Language-Hearing Association (ASHA). In addition to the clinician’s credentials, you also want to find an SLP that actively seeks to develop a relationship with both you and your child. The three-way relationship between a parent/guardian, child, and SLP needs to be one of encouragement, trust, and respect in order for the therapy to reach its highest potential in the child’s development. An SLP should be approachable, concerned, informative, and most importantly, FUN!

Olivia points to the doll house. Miss Katie replies, “Oh, you want the doll house. Use your words.” Olivia only smiles.

Miss Katie models, “Doll house.” Olivia responds, “Dah.”

“Good trying, Olivia. O.k. Let’s sit on the floor.” Olivia joins Miss Ka-

## IT’S SPEECH TIME! Step into the world of a speech therapy session

Co-Written By Kathleen S. Burch, M.Ed., CCC-SLP and Kimberly J. Tucker, M.Ed., CFY-SLP

activity choices include a book about “Dora, the Explorer,” a farm animal puzzle, a doll house, music, and a toy microphone.

Miss Katie follows Olivia into her therapy room asking, “What do you want to do first? Do you want to play with the doll house or listen to a song?” She closes the door behind them.

Many parents and caregivers are apprehensive about bringing their children to a speech-language pathologist (SLP). Though scary as this word may seem, the goal of any SLP is to help their patients communicate more effectively, whether that patient has

tie on her ladybug rug. “Look at this pretty house.” Olivia picks up a transparent bag containing all of the people and items that belong in the doll house and hands it to Miss Katie. “What do you want, Olivia?” Olivia pushes the bag closer to Miss Katie. “You want me to open the bag?” Miss Katie asks, signing “open” with her hands. Olivia signs

“open,” and Miss Katie begins unzipping the bag.

“Here’s a bed, a baby swing . . . and here’s the baby. I see the bathtub . . . and the potty.” “What’s this?” Miss Katie asks holding up a small table.

Olivia points to the table.

“I see it. What is it?” Miss Katie asks again. “Is it a car?”

Miss Katie shakes her head, prompting Olivia to say, “Nooooooo.”

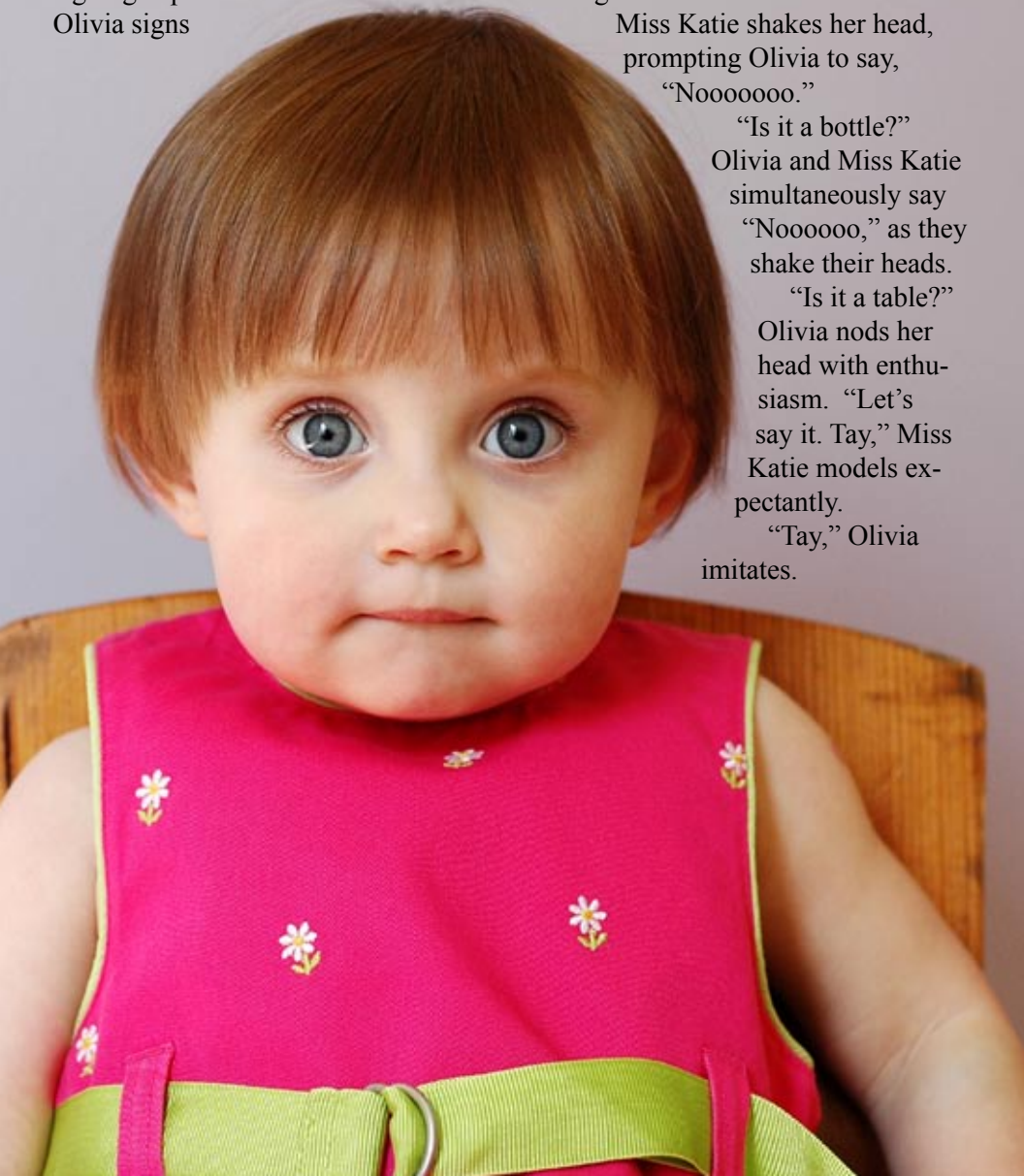
“Is it a bottle?”

Olivia and Miss Katie simultaneously say “Nooooooo,” as they shake their heads.

“Is it a table?”

Olivia nods her head with enthusiasm. “Let’s say it. Tay,” Miss Katie models expectantly.

“Tay,” Olivia imitates.



“Bul.”, “Buh.”, “Table.”, “Tay,” Olivia attempts.

“Oops. Let’s try it one more time,” Miss Katie encourages while tapping Olivia’s leg with each syllable. “Ta-ble.”

As Olivia begins, “Tay . . .,” Miss Katie touches her lips with her finger to provide a visual cue for Olivia to complete the word, and Olivia continues “. . . buh.”

“Yeah!!!” Miss Katie cheers as she congratulates Olivia on imitating a two syllable word. “You said ‘table.’” That’s right, it is a table.”

“Can you put the baby in the bathtub?” Olivia picks up the baby and carefully places her inside the bathtub. “Wow! I like how you are following directions. Let’s try another one. Now, put the baby behind the swing.”

Olivia takes the baby out of the bathtub and puts her in the swing. “Uh-oh, I said put the baby behind the swing. You put the baby in the swing.” Miss Katie takes the baby out of the swing and puts her behind the swing repeating, “behind the swing.” Olivia participates in several more turns of following directions involving spatial concepts.

Getting bored with this activity, Olivia picks up a toy chair and throws it across the room. Miss Katie picks up the chair and gently says, “Oh, no throwing, Olivia. You must be all done with the doll house.” “Tell me,” requests Miss Katie while signing and saying, “All done.”

Olivia throws the baby. “We’re going to have to pick the baby up so

we can put away the doll house. Then we can choose another activity.” Miss Katie carefully helps Olivia stand up, leads her to the baby, and assists her in taking the baby back to the bag. She then places her hands on Olivia’s hands and helps her sign “all done.” After gentle redirection, Olivia cooperatively helps Miss Katie put all of the toys back into the bag. When Miss Katie finishes singing the “Clean Up” song, she asks Olivia to return the doll house to the counter. They are ready to choose another activity.

On your first visit with a speech-language pathologist, your child’s speech and language skills will be evaluated in order to determine areas of strength and weakness using formal and informal assessments, a parent questionnaire/interview, and observations. The purpose of this evaluation is to investigate whether or not your child has developed all of the speech sounds and language skills that are standard for the child’s age. Information gained during the evaluation will be used to develop specific goals tailored to your child’s speech and language needs. After goals have been established, the SLP selects materials that will be used to facilitate patients’ goals and are compatible with their interests. When a child has speech sound (articulation) errors, the SLP will start by strengthening the child’s mouth and teaching where the lips and tongue should be placed to produce the sound correctly. The SLP will then have the child imitate the sound in words, then sentences, and ultimately

use the sound correctly without a model in conversation. Children with language disorders have different goals that range from early emerging language skills (identifying and naming objects) to later developing language skills (answering questions and formulating complex sentences). Every goal, regardless of the type, aims for the same outcome: the improvement of your child's communication skills and the ability to use these skills in their daily life. Communication is a vital skill in our society that begins developing even before a child ever says a single word. In fact, how a child socializes, plays, and maintains attention all affect speech and language development. Your SLP may spend time teaching these skills as a springboard for targeting specific speech and language goals.

"You did a great job today, Olivia. Let's go find Mom." Olivia opens the door and zooms toward the waiting room.

"Hi, pretty girl. Did you have fun with Miss Katie?" Olivia's mother inquires. Olivia nods and wraps her arms around her mother's legs.

"Olivia is really working hard. She pointed to ten out of thirteen objects in pictures. She understands 'in' and 'on,' but continues to have difficulty with identifying 'behind.' Her imitation skills are really improving. She imitated five two-syllable words today. That's much more than last

week. You guys must really be practicing with her at home. She signed 'open' and 'all done' by herself after I helped her with these a few times early in the session. Her attention span is increasing, too. She completed all of the activities today. I'm so proud of her. Now, remember to try to teach the concept of "behind" throughout your day. You could play "Hide-and-Seek" and tell her to hide her favorite doll behind different items in your house. Also, continue to encourage her attempts to imitate words. If she doesn't try the first time she's asked,

break the word down into syllables. Once she successfully imitates each individual syllable, try having her put the two together. Do you have any ques-

tions?"

"Well, we've been trying to get Olivia to imitate her sister's name, Kris. She just can't say it."

"Why don't you try modeling the 'k' and then the 'ris' to see if she can put these together? The combination of 'kr' is difficult for a child her age to imitate. Our goal is to help Olivia communicate independently and confidently."

"I've never thought of it that way. Thanks, Katie."

"No problem. I'll see you on Thursday. Have a good afternoon."

Miss Katie turns to see the door open and knows it's time to play with another friend.

Speech and language therapy

"Speech and language therapy does not end when the session is completed."

does not end when the session is completed. Parents and caregivers play an essential role in the progress of their children's speech and language development. The SLP will provide you and your child valuable information that will allow you to practice and implement strategies at home. The classic rule "practice makes perfect," is just as applicable to speech and language skills as it is to sports or ballet. Children learn techniques and skills during the session, but they need reinforcement at home to help them use the skills on a regular basis. Additionally, since we are building life-long skills, it is important to maintain consistency with your child's therapy schedule. Inevitably, frequently missed sessions can certainly slow down a child's progression toward their goals.

Speech and language therapy is available to children of all ages and with varying needs. If you suspect that your child's speech and language skills are delayed, the first step is to consult with your pediatrician to request a referral for a speech and language evaluation. Once you receive the referral, contact a local speech-language pathologist or facility that provides speech and language services to schedule an appointment.

*Kathleen S. Burch and Kimberly J. Tucker are Speech-Language Pathologist with Therapy Solutions of Georgia, Inc. located at 3615 Braselton Highway, Suite 103, Dacula, GA 30019-5907. For more information call (678) 377-9634*